PATENT APPLICATION

	DECLARATION	AND POWER OF AT		
ATTORNEY DOCKE	T NO. 50037.240US01		MS DC	OCKET NO. 304157.1
ly residence/post offic	ntor, I hereby declare that ce address and citizenship are a			
lural names are listed	nal, first and sole inventor (if or I below) of the subject matter, ID SYSTEM FOR MANAGING	which is claimed and	elow) or an original for which a patent i	, first and joint inventor (is sought on the invention
	ch is filed herewith unless the fo		,	
	d onas US Ap			plication
Number	and was amend	ded on	(if applicable).	F
hereby state that I hav mended by any amen atentability as defined	re reviewed and understood the dment(s) referred to above. I a	e contents of the above-	identified specification disclose all inform	on, including the claims, a lation, which is material (
oreion Anniication(6)	and/or Claim of Foreign Priori	itv		
	te listed below and have also g date before that of the application NUMBER		s claimed:	ED UNDER 35 U.S.C. 119
			YES:	NO:
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OWER OF ATTORNI s a named inventor. I	EY: hereby appoint the following at	Hamaria) and (ar amount	(a) annanintad mitte	
,	reserve appears are some ware at	morney(s) and or agent	(s) associated with	
		stomer No. 27488	s) associated with	
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	Cus	stomer No. 27488		

DECLARATION AND POWER OF ATTORNEY

ATTORNEY DOCKET NO. 50037,240US01

MS DOCKET NO. 304157.1

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of Inventor: William James Griffin	Citizenship: <u>US</u>
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William & Aller	2/17/04
Inventor's Signature	Date
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Full Name of Inventor: <u>Howard M. Crow, III</u>	Citizenship: <u>US</u>
Residence: Sammamish, Washington	
Post Office Address: 2127 East Lake Sammamish Place SE, Sammamish, WA 98075	
Inventor's Signature	Date

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As a below named inven My residence/post office I believe I am the origin plural names are listed entitled: METHOD ANI the specification of which was filed Number I hereby state that I have amended by any amend patentability as defined Foreign Application(s)	tor, I hereby declare that address and citizenship are a al, first and sole inventor (if o below) of the subject matter, D SYSTEM FOR MANAGING h is filed herewith unless the f onas US Ap and was amende reviewed and understood th lment(s) referred to above. I in 37 CFR 1.56. and/or Claim of Foreign Prior riority benefits under Title 35	which is claimed and A PORTAL following box is checked oplication Serial No. or ided one contents of the above acknowledge the duty	for which a patent is so it: PCT International Application (if applicable). -identified specification, to disclose all information in the control of the c	ation including the claims, as on, which is material to application(s) for paten
or inventor(s) certificat	e listed below and have als	o identified below an	is claimed:	· parent er invers
or inventor(s) certificate certificate having a filing	e listed below and have als g date before that of the applic	o identified below any attion on which priority	is claimed:	
or inventor(s) certificat	e listed below and have als	o identified below an	PRIORITY CLAIMED	JNDER 35 U.S.C. 119
or inventor(s) certificate certificate having a filing	e listed below and have als g date before that of the applic	o identified below any attion on which priority	is claimed:	
or inventor(s) certificate certificate having a filing COUNTRY POWER OF ATTORNE	e listed below and have als date before that of the applic APPLICATION NUMBER EY: hereby appoint the following a	o identified below any cation on which priority DATE FILED	PRIORITY CLAIMED I YES: YES:	JNDER 35 U.S.C. 119 NO:
certificate having a filing COUNTRY POWER OF ATTORNE As a named inventor, I	e listed below and have als date before that of the applic APPLICATION NUMBER EY: hereby appoint the following a	DATE FILED attorney(s) and/or agentstomer No. 27488	PRIORITY CLAIMED I YES: YES: YES:	JNDER 35 U.S.C. 119 NO: NO:
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DECLARATION AND POWER OF ATTORNEY MS DOCKET NO. 304157.1

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of Inventor: William James Griffin	Citizenship: <u>US</u>
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Inventor's Signature	Date
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Residence: Sammamish, Washington	
Post Office Address: 2708 232nd Place SE, Samammish, WA 98075 Inventor's Signature	2/18/04'
Full Name of Inventor: Howard M. Crow, III	Citizenship: <u>US</u>
Residence: <u>Sammamish, Washington</u>	
Post Office Address: 2127 East Lake Sammamish Place SE, Sammamish, WA 98075	
Inventor's Signature	Date

PATENT APPLICATION

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As a below named invertible My residence/post office I believe I am the original plural names are listed entitled: METHOD AN the specification of whice was filed Number I hereby state that I have	ntor, I hereby declare that he address and citizenship are a hal, first and sole inventor (if of below) of the subject matter, D SYSTEM FOR MANAGING his filed herewith unless the file on as US Aparameter and was amender reviewed and understood the liment(s) referred to above. I	as stated below next to only one name is listed, which is claimed and A PORTAL following box is checked oplication Serial No. or ded on	my name; below) or an original, for which a patent i d: PCT International Ap (if applicable).	, first and joint inventor (is sought on the invention plication on, including the claims, as
Foreign Application(s)	ond/or Claim of Family Balan			
	and/or Claim of Foreign Prior	_		·
or inventor(s) certificat	riority benefits under Title 35, e listed below and have also g date before that of the applica	o identified below an	y foreign application	n application(s) for patent for patent or inventor(s)
COUNTRY	APPLICATION NUMBER	DATE FILED	PRIORITY CLAIME	D UNDER 35 U.S.C. 119
			YES:	NO:
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POWER OF ATTORNE As a named inventor, I h	ereby appoint the following at	ttorney(s) and/or agen storner No. 27488	t(s) associated with	
	tion and transact all business i	n the Patent and Trade	mark Office connected	therewith.
Send Correspondence to:			Direct Telephone Call	a To:
Timothy P. Sullivan Merchant & Gould P.C. P.O. Box 2903 Minneapolis, MN 55402-090	3		206.342.6254 206.342.6200	

	DECLARATION AND POWER OF A	TTORNEY	•
ATTORNEY DOCKET NO. 50037.740	USIT		IS DOCKET NO SOMET 1

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/ Munn	2/17/2004
Inventor's Signature	Date